(Systemwide Senate Review) Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

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DOUGLAS HAYNES, VICE PROVOST  
ACADEMIC PERSONNEL & PROGRAMS

Re: Systemwide Review of Revisions to Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Vice Provost Haynes:

As requested, I distributed for systemwide Senate review the revisions to UC Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. Nine Academic Senate divisions and the University Committee on Affirmative Action, Diversity, and Equity submitted comments. These comments were discussed at Academic Council’s May 24 meeting and are attached for your reference.

The policy establishes UC Health’s cooperation with the California Values Act of 2018, which limits federal immigration enforcement actions at public institutions, including hospitals and health facilities, and prohibits the use of state and local resources to assist immigration enforcement “to the fullest extent possible consistent with federal and state law.” The policy outlines specific measures to ensure that UC Health complies with the Act and provides guidance for managing situations where immigration officers are attempting to make contact with patients in UC Health facilities.

The policy met with overall support from the Senate. Faculty reviewers endorsed the policy and its goal to protect UC Health patients from immigration enforcement that might interfere with their care. In addition to offering suggestions for small edits and typographical corrections, reviewers suggested that the policy could be even more patient-centered by including stronger assurances that UC Health will protect vulnerable populations from immigration inquiries by proactively informing patients who are being sought by an officer. Additionally, reviewers suggest that the policy clarify its application at UC Health affiliate sites, explicitly address research operations conducted at UC Health facilities, and include protections for hospital staff who may come in contact with immigration officials.
We appreciate the opportunity to comment and encourage you to incorporate these clarifications and suggestions into the policy to strengthen its patient protections. Please do not hesitate to contact me if you have additional questions.

Sincerely,

Susan Cochran, Chair
Academic Council

Cc: Academic Council
Executive Vice President Byington
Associate Vice President Nelson
Director Schmitt
Campus Senate Executive Directors
Executive Director Lin

Encl.
May 16, 2023

SUSAN COCHRAN  
Chair, Academic Council

Subject: Systemwide Proposed Presidential Policy – Responding to Immigration Enforcement Issues Involving Patients in UC Facilities

Dear Chair Cochran:

The Council of the Berkeley Division (DIVCO) has no comments on the proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. We feel that the proposed policy is clear and well-conceived.

Sincerely,

Mary Ann Smart  
Professor of Music  
Chair, Berkeley Division of the Academic Senate

cc: Maximilian Auffhammer, Vice Chair, Berkeley Division of the Academic Senate  
Jocelyn Surla Banaria, Executive Director
May 17, 2023

Susan Cochran
Chair, Academic Council

RE: Proposed Revisions to Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Susan,

The proposed revisions to the Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities were forwarded to all standing committees of the Davis Division of the Academic Senate. Three committees responded: the Faculty Executive Committees of the College of Letters and Science (L&S), the School of Medicine (SOM), and the School of Nursing (SON).

Committees support the proposed revisions. For the policy introduction, SOM suggests using “Attorney General’s Office” consistently instead of “Attorney General” in the singular, to prevent confusion about an elected individual versus the office.

The Davis Division appreciates the opportunity to comment.

Sincerely,

Ahmet Palazoglu
Chair, Davis Division of the Academic Senate
Distinguished Professor of Chemical Engineering
University of California, Davis

Enclosed: Davis Division Committee Responses

c: Monica Lin, Executive Director, Systemwide Academic Senate
   Michael LaBriola, Assistant Director, Systemwide Academic Senate
   Edwin M. Arevalo, Executive Director, Davis Division of the Academic Senate
Proposed Revisions to Presidential Policy on Immigration Enforcement in UC Health Facilities

FEC: College of Letters and Science Committee Response

May 12, 2023

The committee approves, and does not have any further questions.
Proposed Revisions to Presidential Policy on Immigration Enforcement in UC Health Facilities

FEC: School of Medicine Committee Response

May 12, 2023

Per the April 26 FEC meeting discussion:

Suggest not stating ‘Attorney General’ in the singular, but rather consistently state AG’s Office, so there isn’t any confusion about an individual elected official versus the department. Edits would take place in the Policy introduction.
Proposed Revisions to Presidential Policy on Immigration Enforcement in UC Health Facilities

FEC: School of Nursing Committee Response

May 12, 2023

The SON suggests to include language that anyone who takes care of patients in the hospital has the right to refuse to give patient information to immigration enforcement.
May 17, 2023

Susan Cochran, Chair
Academic Council

Re: Systemwide Review of Presidential Policy – Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Chair Cochran,

The Irvine Division discussed the proposed revisions to the Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities at its Cabinet meeting on May 16, 2023. The Council on Faculty Welfare, Diversity, and Academic Freedom (CFW) and Council on Equity and Inclusion (CEI) also reviewed the proposal. Their feedback is attached for your review.

Cabinet members concurred with the councils’ feedback.

The Irvine Division appreciates the opportunity to comment.

Sincerely,

Georg Striedter, Chair
Academic Senate, Irvine Division

Enclosures: CFW, CEI memos

Cc: Arvind Rajaraman, Chair Elect-Secretary
    Jisoo Kim, Executive Director
    Gina Anzivino, Associate Director
May 4, 2023

GEORG STRIEDTER, CHAIR
ACADEMIC SENATE, IRVINE DIVISION

Re: Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

The Council on Equity and Inclusion discussed the proposed revisions to the Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities at its meeting on May 1.

The Council was unanimously supportive of having a policy around this complex and sensitive issue. At the same time, members would like to see the policy be more patient centered than focused on immigration enforcement. As an example, in section III.A., they suggested reframing the role of administrators or designees from one of being responsive to immigration enforcement inquiries and requests to convey an overall philosophy about health sites’ mission to provide healthcare, reduce barriers to healthcare, and avoid actions that create a chilling effect or that place health providers in carceral or policing roles.

Members also raised concerns about some policy language that appears to give health facility staff members and/or volunteers discretion in responding to requests from immigration officers. For instance, in section III.B.1., they recommended striking “or expressly authorized” in order to avoid arbitrary or discriminatory application and provide consistency in protecting patient information and fostering trust (e.g., “Health facilities must implement policies that are protective of patient information, under which health facility staff members and volunteers disclose patient information only when required to do so by all applicable laws.”). Similarly, in order to eliminate discretionary application, “or expressly authorized” should be struck in section D.1.a. (e.g., “Health facilities should give assurances that they will not release information to third parties for immigration enforcement purposes, except as required by law or court order.”).

To strengthen the language and protections further, and to establish the legal basis under which patient information is sought, Council members also suggested adding (e.) to III.B.3. to read, “the legal authority under which the agency is seeking the requested information.”

Some members expressed concern about the grouping of legal instruments (e.g., subpoenas and court orders) in section III.B.4. while not providing for patient objection within the policy. To address this, the policy should differentiate in light of patient rights to object, such as to subpoenas for documents. Council members also recommended striking “if possible” from this section regarding consultation with counsel, and rather say that, “health facilities should consult with legal counsel each time on such matters.”

Finally, some members noted that the policy complies with the California Attorney General’s model policies for health facilities that limit assistance with immigration enforcement “to the fullest extent possible consistent with federal and state law,” and that UC Health facilities are “encouraged” but not required to adopt the model policies. They suggested that there should be some sort of backstop in place for those facilities that choose not to adopt the model policies.
The Council on Equity and Inclusion appreciates the opportunity to comment.

Sincerely,

Jane Stoever, Chair
Council on Equity and Inclusion

Cc: Arvind Rajaraman, Chair Elect-Secretary
    Jisoo Kim, Executive Director
    Gina Anzivino, Associate Director and CEI Analyst
    Stephanie Makhlouf, Senate Analyst
GEORG STRIEDTER, CHAIR
ACADEMIC SENATE – IRVINE DIVISION

Re: Presidential Policy – Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Systemwide Senate Chair Susan Cochran distributed for review proposed revisions to a presidential policy on responding to immigration enforcement issues involving patients in UC Health facilities. The policy was initially implemented as an interim policy and is now recommended to move out of interim status.

The Council on Faculty Welfare, Diversity, and Academic Freedom (CFW) discussed this issue at its meeting on April 11, 2023, and submits the following comment:

Members generally agreed that the policy seems thorough and clear. However, some members expressed concern that it does not provide enough protections for these vulnerable populations.

Sincerely,

Lisa Naugle, Chair
Council on Faculty Welfare, Diversity, and Academic Freedom

C: Jisoo Kim, Executive Director
Academic Senate

Gina Anzivino, Associate Director
Academic Senate

Stephanie Makhlouf, Cabinet Analyst
Academic Senate
May 8, 2023

Susan Cochran
Chair, UC Academic Senate

Re: (Systemwide Senate Review) Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Chair Cochran,

The divisional Executive Board appreciated the opportunity to review the Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. The Executive Board (EB) reviewed the proposal at its meeting on April 27, 2023.

EB members endorse the principle of protecting patients from immigration enforcement. They voted to approve a motion to endorse the proposed policy and strongly suggest that UC Health affiliates also be subject to the policy. They emphasized the importance of prioritizing the health of all patients in the care of UC Health Facilities and affiliates, and noted the significance of instilling these core values in UC medical and nursing students who train at these facilities.

Sincerely,

Jessica Cattelino
Chair
UCLA Academic Senate

Cc: April de Stefano, Executive Director, UCLA Academic Senate
    Andrea Kasko, Vice Chair/Chair Elect, UCLA Academic Senate
    Shane White, Immediate Past Chair, UCLA Academic Senate
May 17, 2023

To: Susan Cochran, Chair, Academic Council

Re: Systemwide Review of Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

The proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities was distributed for comment to the Merced Division Senate Committees and the School Executive Committees. The following committees offered comments for consideration. The committees’ comments are appended to this memo.

- Committee on Research (CoR)
- Committee on Faculty Welfare and Academic Freedom (FWAF)

CoR noted that the proposed policy does not explicitly mention research operations. CoR noted that overall, the policy describes the procedures to follow when an officer enters a facility with and without a warrant. Consultation with legal counsel and/or appropriate administrators when such an event occurs is provided for most cases. Section III.C.10 of the policy describes procedures for forced entry by an officer. The text states that health facility staff should comply with the officer’s order, should not attempt to physically interfere with the officer, and should document the officer’s actions while at the facility. CoR believes that this item may benefit from revisions that reflect additional protections to patients and hospital staff in such an event, rather than just documenting after the event. As mentioned above, CoR noted that the policy does not explicitly address research operations despite the fact the clinicians and other UC health staff and entities may engage in research activities at UC Health facilities. If this is the case and if this document is relevant to such research-related activities, CoR asserted that the policy could benefit from explicit mention of relevance to research activities, and if necessary, peculiarities related to research situations.

FWAF agreed with the purpose of this policy: to make sure that the rights of patients are protected and that hospitals do as little as possible, while staying consistent with the law, to assist immigration enforcement. FWAF found the updates to the interim policy to be appropriate to that purpose. However, FWAF had one concern. The policy offers some guidance on “Monitoring and Receiving Visitors” (Section E.), which specify that some areas of health facilities could have restricted access, and visitors must register with the hospital and provide certain information, such as their name, purpose of their visit, and proof of identity. FWAF worried that an immigration officer could pose as a visitor and gain access to
a patient that way. If there is a way to avoid this problem, FWAF requested that it be included in the policy.

Divisional Council reviewed the committees’ comments via email and supports their various points and suggestions.

The Merced Division thanks you for the opportunity to comment on this proposed policy.

CC: Divisional Council
Monica Lin, Executive Director, Systemwide Academic Senate
Michael LaBriola, Assistant Director, Systemwide Academic Senate
Senate Office
CoR reviewed the Presidential Policy – Immigration Enforcement Issues Involving Patients in UC Health Facilities and offers the below comments.

The document summarizes policies to deal with immigration enforcement in UC Health facilities. The document does not explicitly mention research operations. Overall, it describes the procedures to follow when an officer enters a facility with and without a warrant. Consultation with legal counsel and/or appropriate administrators when such an event occurs is provided for most cases. Section III.C.10 of the policy describes procedures for forced entry by an officer. The text states that health facility staff should comply with the officer’s order, should not attempt to physically interfere with the officer, and should document the officer’s actions while at the facility. This item may benefit from revisions that reflect additional protections to patients and hospital staff in such an event, rather than just documenting after the event. As mentioned above, the document does not explicitly address research operations despite the fact the clinicians and other UC health staff and entities may engage in research activities at UC Health facilities. If this is the case and if this document is relevant to such research-related activities, the document could benefit from explicit mention of relevance to research activities, and if necessary, peculiarities related to research situations.

We appreciate the opportunity to opine.

cc: Senate Office
April 7, 2023

To: Patti LiWang, Chair, Division Council

From: David Jennings, Chair, Committee on Faculty Welfare and Academic Freedom (FWAF)

Re: Presidential Policy – Immigration Enforcement Issues Involving Patients in UC Health Facilities

FWAF reviewed the Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities and offers the below comments.

The proposed Policy aims to bring the UC Health practices into alignment with certain “model policies” developed by the California Attorney General which limit “assistance with immigration enforcement to the fullest extent possible consistent with federal and state law.” It aims to protect the rights of patients that immigration enforcement officers might wish to investigate or gain access to.

The proposed policy requires that UC hospitals have someone responsible for this protection present at every shift, who knows the procedures for interacting with immigration enforcement officers (A.1). The responsible party must offer only the information about patients expressly required by law (B.1.) and they must consult legal counsel about the extent to which they are required to comply with any of the officer’s requests (B.2., cf., C.2.).

FWAF agrees with the purpose of this policy: to make sure that the rights of patients are protected and that the hospital do as little as possible, while staying consistent with the law, to assist immigration enforcement. And we find the updates to the interim policy to be appropriate to that purpose.

FWAF, however, has one concern. The policy offers some guidance on “Monitoring and Receiving Visitors” (E), which specify that some areas of health facilities could have restricted access, and visitors must register with the hospital and provide certain information, such as their name, purpose of their visit, and proof of identity. FWAF worries that an immigration officer could pose as a visitor and gain access to a patient that way. If there is a way to avoid this problem, FWAF requests that it be included in the policy.

FWAF appreciates the opportunity to opine.

cc: Senate Office
May 9, 2023

Susan Cochran, Chair, Academic Council
1111 Franklin Street, 12th Floor
Oakland, CA 94607-5200

RE: [Systemwide Review] Proposed Presidential Policy regarding Immigration Enforcement
Issues Involving Patients in UC Health Facilities

Dear Susan,

The Riverside Executive Council discussed the subject proposed policy during their May 8, 2023
meeting and had no additional comments to add to those attached from local committees that responded
to the call for comments.

Sincerely yours,

Sang-Hee Lee
Professor of Anthropology and Chair of the Riverside Division

CC: Monica Lin, Executive Director of the Academic Senate
Cherysa Cortez, Executive Director of UCR Academic Senate Office
April 21, 2023

TO: Sang-Hee Lee, Chair
    Riverside Division of the Academic Senate

FROM: John Kim, Chair
      CHASS Executive Committee

RE: Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Having reviewed the memo and related documents regarding the Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities, we had the following questions and concerns:

What responsibility does UC Health have to its patients who are being sought out by immigration enforcement agents? There is no mention in the responsive actions to an immigration enforcement inquiry that UC Health will notify the patient that is central to the inquiry. Rather, the only notifications required are (1) the health administrator (or their designee) handling immigration issues, and (2) legal counsel. Particularly given the research linking immigration enforcement to poor health outcomes (see citations below), it is important that UC Health facilities protect the health and rights of its patients by providing them this essential information. Doing so would also promote greater trust of health officials and practitioners among patients from marginalized communities, which the citations below also link as having declined in this era of increased immigration enforcement.

What responsibility does UC Health, as a public medical facility, have to protect the right of vulnerable patients to access safe and secure healthcare free from the threat of police and immigration enforcement? While the 2018 California Values Act requires state public health facilities to limit compliance with immigration enforcement to the fullest extent possible in accordance with state and federal law, we remain gravely concerned that the current UC policy as written does not require adherence to the Attorney General’s model policies in UC health facilities. Rather, UC Health facilities may in fact “evaluate whether or not to adopt the Attorney General’s policy recommendations in their locally-established implementation policies and procedures” (see Policy Summary, emphasis added). We demand, in the strongest terms possible
and in the spirit of maintaining the safest environment possible for all persons in need of medical care, that the policy not only require adoption of the recommendations but go beyond compliance to also declare all UC health facilities as “sanctuary clinics.” This designation would allow healthcare workers to maintain patient confidentiality while providing high quality medical care to patients in need regardless of immigration status to prevent the threat of deportation and separation of families.

Last, regarding the redline revision on page 5 under C5: we feel that "no document accompanying the request" is vague because (as the rest of the policy rightly notes) immigration officers often present documents that are not actually legal requests to try to convince people to comply. We encourage clarification about what documents would properly authorize a request.

Relevant citations:
April 10, 2023

To: Sang-Hee Lee, Chair
   Riverside Division

From: Denver Graninger, Chair
       Committee on International Education

Re: Systemwide Review: Presidential Policy re: Immigration Enforcement Issues Involving Patients in UC Health Facilities

The Committee on International Education (CIE) reviewed the Systemwide Review of the Presidential Policy re: Immigration Enforcement Issues Involving Patients in UC Health Facilities at their April 6, 2023 meeting, and are supportive of the policy.
April 22, 2023

To: Sang-Hee Lee, Division Chair of the UCR Division of the Academic Senate & Cherysa Cortez, Executive Director of the UCR Academic Senate

From: Raquel M. Rall, Ph.D., Faculty Chair of the School of Education Executive Committee


The members of the SOE Executive Committee reviewed the [Systemwide Review] Proposed Policy: Presidential Policy re: Immigration Enforcement Issues Involving Patients in UC Health Facilities Comments were provided at our monthly meeting and via email. Our feedback is below.

We find the indicated edits appropriate. We wonder, however, if there is an accompanying document that speaks to how to interact with the patient whose immigration status might be called into question? The policy clearly outlines what questions to ask and procedures to follow of law enforcement, etc. but it was not clear what the policies are surrounding ensuring the safety of the actual patient, particularly if that patient is not in the designated “off limits” area. Do UC affiliates have any obligations to the physical and emotional safety of patients during these scenarios in addition to their legal protections? We appreciate the official overview but do not want to lose sight of the people involved in these situations.

Thank you for the opportunity to provide feedback.

Sincerely,

Raquel M. Rall, Ph.D.
Faculty Executive Committee Chair 2022-2025
School of Education
University of California, Riverside
April 21, 2023

TO: Sang-Hee Lee, Ph.D., Chair, Academic Senate, UCR Division
FROM: Marcus Kaul, Ph.D., Chair, Faculty Executive Committee, UCR School of Medicine

Dear Sang-Hee,

The SOM Faculty Executive Committee has reviewed the proposed Presidential Policy regarding Immigration Enforcement Issues Involving Patients in UC Health Facilities. The Committee approved making this policy permanent and has no further comments or suggestions for edits.

Yours sincerely,

[Signature]

Marcus Kaul, Ph.D.
Chair, Faculty Executive Committee School of Medicine
April 21, 2023

Professor Susan Cochran  
Chair, Academic Senate  
University of California  
VIA EMAIL  

Re: Divisional Review of the Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Chair Cochran,

The proposed revisions to the Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities were distributed to San Diego Divisional Senate standing committees and discussed at the April 10, 2023 Divisional Senate Council meeting. Senate Council endorsed the proposal, and noted that the policy seemed reasonable and necessary in order to protect the rights of immigrant patients.

Sincerely,

Nancy Postero  
Chair  
San Diego Divisional Academic Senate

cc: John Hildebrand, Vice Chair, San Diego Divisional Academic Senate  
    Lori Hullings, Executive Director, San Diego Divisional Academic Senate  
    Monica Lin, Executive Director, UC Systemwide Academic Senate
May 16, 2023

Susan Cochran  
Chair, Academic Council  
Systemwide Academic Senate  
University of California Office of the President  
1111 Franklin St., 12th Floor  
Oakland, CA 94607-5200  

Re: Systemwide Review of Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Susan:

The UCSF Senate appreciates the opportunity to review the proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. As you are aware, this policy has been recommended to exit interim status. The UCSF Senate’s Clinical Affairs Committee (CAC), Committee on Rules & Jurisdiction (R&J), and School of Medicine Faculty Council (SOM FC) opined on this review.

First, R&J requests that the policy clarify whether and how the policy applies at affiliate sites (e.g. Veterans Affairs, Zuckerberg San Francisco General Hospital). If the policy does not apply, R&J recommends the policy explicitly advise UC faculty, staff, and learners of this fact and recommend that UC community members seek out similar policies at affiliate sites. CAC, R&J, and SOMFC also recommend adding a Frequently Asked Questions (FAQ) to guide UC employees working at affiliate sites about policy differences and direct them to appropriate resources.

Second, CAC, R&J, and SOMFC request clarification in FAQ section of the proposed policy that details the AG’s model policies, quoted below:

\[
\text{Are the AG’s related policy recommendations required?}
\]

\[
\text{This policy complies with the AG’s model policies. UC Health facilities are encouraged to adopt the AG’s additional recommendations in their locally established policies and procedures including limiting the collection of immigration status/citizen status/national origin information to the patient only.}
\]

This section is vague and needs revision because it does not articulate or reference specific related policy recommendations from the AG. By limiting the collection of immigration status/citizen status/national origin information to patients, the FAQ implies that facilities should be collecting information about the immigration status/citizen status/national origin of patients, which seems problematic. Is that the intent?

Thank you for the opportunity to opine on the revisions to this important policy. If you have any questions, please let me know.

Steve Hetts, MD, Vice Chair  
Thomas Chi, MD, Secretary  
Kathy Yang, PharmD, Parliamentarian

Steven W. Cheung, MD, Chair  
Campus Box 0764  
tel.: 415/514-2696  
academic.senate@ucsf.edu  
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San Francisco, CA 94158  
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Enclosures (3)
Cc: Matt Tierney, Chair, UCSF Clinical Affairs Committee
    Spencer Behr, Chair, UCSF Committee on Rules & Jurisdiction
    Mia Williams, Chair, UCSF School of Medicine Faculty Council
Clinical Affairs Committee  
Matt Tierney, MS, NP, FAAN, Chair

May 11, 2023

Steven Cheung, MD  
Division Chair  
UCSF Academic Senate

Re: Immigration Enforcement Systemwide Review

Dear Chair Cheung:

The Committee on Clinical Affairs (CAC) writes to comment on the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities that is out for a systemwide review.

CAC emphasizes the importance of providing equitable health care delivery for all, recognizing that health care is a right, not a privilege. CAC believes in supporting patients in their health pursuits while doing everything in our abilities as health care providers to minimize or eliminate structural determinants of illness, including stressors related to immigration. For these reasons, CAC supports the proposed policy.

In addition to offering its support, CAC writes to recommend a clarification in the Frequently Asked Question section of the proposed policy. The proposed policy contains one FAQ that is quoted below.

Are the AG’s related policy recommendations required?

This policy complies with the AG’s model policies. UC Health facilities are encouraged to adopt the AG’s additional recommendations in their locally established policies and procedures including limiting the collection of immigration status/citizen status/national origin information to the patient only.

CAC found the answer to this question somewhat confusing. By limiting the collection of immigration status/citizen status/national origin information to patients, the FAQ implies that facilities should be collecting information about the immigration status/citizen status/national origin of patients, which seems problematic. Is that the intent? Additionally, what does it mean to limit the information “to the patient only”? Does that mean facilities should refrain from collecting this information about people who are not patients? Does this mean that facilities should limit the “collection” of this information to conversations with the patient and not put such information in health records? CAC recommends that this FAQ be reviewed and revised to provide greater clarity.
CAC also recommends that an FAQ be added that provides guidance to UC faculty and staff who provide health care services at affiliate sites. UC does not control policies at sites such as the VA or Zuckerberg San Francisco General Hospital (ZSFG), and CAC believes it would be helpful to provide guidance to UC faculty and staff about potential differences and to direct them to appropriate resources.

CAC is aware that ZSFG has an immigration enforcement policy that is similar to the proposed UC policy. CAC is also aware that legal residency requirements for military service limit the number of VA patients who have immigration enforcement concerns. Nevertheless, CAC believes guidance about immigration enforcement at affiliate sites would be helpful. There are many UC affiliates, and faculty and staff may need guidance about what to do if immigration enforcement issues come up when they are working at an affiliate.

Thank you for the opportunity to comment on the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. Please contact me or Senate analyst Kristie Tappan if you have questions about CAC’s comments.

Sincerely,

Matt Tierney, MS, NP, FAAN
Clinical Affairs Committee Chair

CC: Todd Giedt, Senate Executive Director
Sophia Root, Senate Analyst
Committee on Rules and Jurisdiction
Spencer Behr, MD, Chair

May 8, 2023

Steven Cheung, MD
Division Chair
UCSF Academic Senate

Re: Immigration Enforcement Systemwide Review

Dear Chair Cheung:

The Committee on Rules and Jurisdiction (R&J) writes to comment on the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities that is out for a systemwide review.

R&J requests that the policy clarify whether and how the policy applies at affiliate sites. If the policy does not apply, R&J recommends the policy explicitly advise UC faculty, staff, and learners of this fact and recommend that UC community members seek out similar policies at affiliate sites.

R&J also joins its colleagues on the UCSF Clinical Affairs Committee in requesting that the FAQ in the policy on the AG’s related policy recommendations be revised to provide more information about collecting immigration status information about patients. The FAQ references the “AG’s related policy recommendations” without describing or citing these related recommendations.

R&J reviewed the model policy “Promoting Safe and Secure Healthcare Access for All: Guidance and Model Policies to Assist California’s Healthcare Facilities in Responding to Immigration Issue” on the California Attorney General’s website, but it was still unclear to R&J which “related policy recommendations” were referenced by the FAQ. R&J recommends that this FAQ provide more information and clarify whether and when information about anyone’s immigration status should be collected, including patients.

Thank you for the opportunity to comment on the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. Please contact me or Senate Analyst Kristie Tappan (kristie.tappan@ucsf.edu) if you have questions about CAC’s comments.

Sincerely,

Spencer Behr, MD
Committee on Rules and Jurisdiction Chair

Cc: Todd Giedt, UCSF Academic Senate Executive Director
    Sophia Bahar Root, UCSF Academic Senate Analyst
School of Medicine Faculty Council  
Mia Williams, MD, MS, Chair

May 11, 2023

Steven Cheung, M.D.  
Division Chair  
UCSF Academic Senate

Re: Immigration Enforcement Systemwide Review

Dear Chair Cheung:

The School of Medicine Faculty Council (SOMFC) writes to comment on the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities that is out for a systemwide review. The SOMFC joins its colleagues on the Clinical Affairs Committee (CAC) in raising two suggestions related to the Frequently Asked Questions (FAQ) section of the policy.

First, the SOMFC agrees that the following FAQ raises questions about whether and when to collect information about the immigration status/citizen status/national origin of people. The FAQ provides,

Are the AG’s related policy recommendations required?

This policy complies with the AG’s model policies. UC Health facilities are encouraged to adopt the AG’s additional recommendations in their locally established policies and procedures including limiting the collection of immigration status/citizen status/national origin information to the patient only.

The SOMFC recommends that the FAQ provide more information about the “AG’s additional recommendations” and explain or offer examples of when it would be appropriate to collect information on someone’s immigration status/citizen status/national origin.

The SOMFC also joins CAC in recommending that an FAQ be added that provides guidance to UC faculty and staff who provide health care services at affiliate sites.

Thank you for the opportunity to comment on the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. Please contact me or Senate analyst Kristie Tappan if you have questions about the SOMFC’s comments.

Sincerely,

Mia Williams, MD, MS
Chair of the School of Medicine Faculty Council

cc:  Sophia Bahar Root, UCSF Academic Senate Analyst
     Todd Giedt, UCSF Academic Senate Executive Director
May 17, 2023

To:    Susan Cochran, Chair
       Academic Senate

From:  Susannah Scott, Chair
       Santa Barbara Division

Re:    Systemwide Review of the Proposed Presidential Policy - Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

The Santa Barbara Division distributed the Proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities to the Council on Faculty Welfare, Academic Freedom, and Awards, the Committee on Research Policy and Procedures, and the Committee on Rules, Jurisdiction, and Elections. All three groups opted not to opine.

As UC Santa Barbara does not have a UC Health provider, the Santa Barbara Division does not have any input to offer regarding the proposed policy.

We thank you for the opportunity to comment.
May 12, 2023

SUSAN COCHRAN, CHAIR, ACADEMIC COUNCIL

RE: SYSTEMWIDE REVIEW OF PROPOSED PRESIDENTIAL POLICY ON RESPONDING TO IMMIGRATION ENFORCEMENT ISSUES INVOLVING PATIENTS IN UC HEALTH FACILITIES

Dear Susan,

The University Committee on Affirmative Action, Equity and Diversity (UCAADE) welcomes the opportunity to provide feedback on the proposed Presidential Policy on Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. This policy establishes the UC’s cooperation with the California Values Act of 2018, which requires the California Attorney General to publish policies “limiting assistance with immigration enforcement to the fullest extent possible consistent with federal and state law,” while allowing health facilities leeway in their adoption of these policies. The policy does not change the requirement that staff members respond to requests to disclose patient information only as “required or expressly authorized to do so by all applicable laws.”

UC Health strives to create a safe place for high quality health care delivery, free of interruption from immigration enforcement activities. The policy outlines specific measures to comply with laws as well as adding changes to indicate specific responses to varying kinds of immigration enforcement requests and actions.

Additions include requiring a staff member for each shift at a UC health center to address immigration issues; noting that requests for information such as patient release do not require compliance without specific documentation; and clear documentation of restricted-access areas.
UCAADE applauds the effort to provide specific, actionable policies for UC health care providers. UCAADE approves the proposed policy.

Sincerely,

Louis DeSipio, Chair
UCAADE

cc: UCAADE
May 8, 2023

Susan Cochran  
Chair, UC Academic Senate

Re: (Systemwide Senate Review) Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Chair Cochran,

The divisional Executive Board appreciated the opportunity to review the Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities. The Executive Board (EB) reviewed the proposal at its meeting on April 27, 2023.

EB members endorse the principle of protecting patients from immigration enforcement. They voted to approve a motion to endorse the proposed policy and strongly suggest that UC Health affiliates also be subject to the policy. They emphasized the importance of prioritizing the health of all patients in the care of UC Health Facilities and affiliates, and noted the significance of instilling these core values in UC medical and nursing students who train at these facilities.

Sincerely,

Jessica Cattelino  
Chair  
UCLA Academic Senate

Cc: April de Stefano, Executive Director, UCLA Academic Senate  
Andrea Kasko, Vice Chair/Chair Elect, UCLA Academic Senate  
Shane White, Immediate Past Chair, UCLA Academic Senate
February 17, 2023

CHANCELLORS
ACADEMIC COUNCIL CHAIR COCHRAN
LABORATORY DIRECTOR WITHERELL
ANR VICE PRESIDENT HUMISTON

Re: Systemwide Review of Proposed Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities

Dear Colleagues:

Enclosed for systemwide review are proposed revisions to Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities.

This policy was initially implemented as an interim policy and is now recommended to move out of interim status.

The policy complies with the October 1, 2018, California Attorney General's Office published immigration enforcement-related guidance and model policies for health facilities, entitled “Promoting Safe and Secure Healthcare Access for All: Guidance and Model Policies to Assist California’s Healthcare Facilities in Responding to Immigration Issues.” The CA AG’s guidance complies with the California Values Act (Cal. Gov. Code § 7284 et seq.), which went into effect on January 1, 2018.

As a result of the consultative process and to address experiences during the interim implementation, language to clarify custody related requirements has been included in this update. Additional updates were made to address concerns for private and public designated areas within a facility and to require an immigration policy resource for all shifts.

Systemwide Review

Systemwide review is a public review distributed to the Chancellors, the Chair of the Academic Council, the Director of the Lawrence Berkeley National Laboratory, and the Vice President of Agriculture and Natural Resources requesting that they inform the general University community,
especially affected employees, about policy proposals. Systemwide review also includes a mandatory, 90-day full Senate review.

Employees should be afforded the opportunity to review and comment on the draft policy. Attached is a Model Communication which may be used to inform non-exclusively represented employees about these proposals. The Labor Relations Office at the Office of the President is responsible for informing the bargaining units representing union membership about policy proposals.

We would appreciate receiving your comments no later than May 18, 2023. Please submit your comments to brandi.schmitt@ucop.edu. If you have any questions, please contact Anne Foster at anne.foster@ucop.edu.

On behalf of Dr. Byington,

Zoanne Nelson
Associate Vice President, UC Health

Enclosures:
1) Draft Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities (clean copy)
2) Draft Presidential Policy Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities (tracked-changes copy)
3) Model Communication

cc: President Drake
    Provost and Executive Vice President Newman
    Executive Vice Chancellors/Provosts
    Executive Vice President Byington
    Executive Vice President and Chief Operating Officer Nava
    Senior Vice President Bustamante
    Vice Provost Haynes
    Vice President and Vice Provost Gullatt
    Vice President and Chief Clinical Strategy Officer Foster
    Vice President Lloyd
    Vice President Maldonado
    Vice Provosts/Vice Chancellors of Academic Affairs/Personnel
    Associate Vice Provost Lee
    Associate Vice President Matella
    Deputy General Counsel Nosowsky
    Deputy General Counsel Woodall
Assistant Vice Provosts/Vice Chancellors for Academic Personnel
Executive Director and Chief of Staff Henderson
Executive Director Lin
Executive Director Silas
Executive Director Schmitt
Interim Chief of Staff Halimah
Chief of Staff Kao
Chief of Staff Levintov
Chief Policy Advisor McAuliffe
Director Anders
Director Roller
Director Sykes
Associate Director Dicaprio
Associate Director Nguyen
Associate Director Weston-Dawkes
Associate Director Woolston
Assistant Director LaBriola
Manager Crosson
Administrative Manager Garcia
Manager Garza
Analyst Durrin
Administrative Officer Babbitt
Policy Advisory Committee
Responding to Immigration Enforcement Issues Involving Patients in UC Health Facilities—INTERIM Policy

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<th>Responsible Officer:</th>
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<td>Last Review Date:</td>
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<tr>
<td>Scope:</td>
<td>This Policy applies to University of California Medical Centers and Hospitals, including University-owned Children’s Hospitals.</td>
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Contact: Anne Foster, Cathryn Nation
Title: Chief Clinical Officer, Vice President — Health Sciences, UC Health
Email: Cathryn.Nation@ucop.edu, Anne.Foster@ucop.edu
Phone: (510) 987-0306-9705

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I. POLICY SUMMARY

The California Values Act (Cal. Gov. Code § 7284 et seq.), which went into effect on January 1, 2018, requires that the California Attorney General “publish model policies limiting assistance with immigration enforcement to the fullest extent possible consistent with federal and state law” at several kinds of public institutions and facilities, including “health facilities operated by the state or a political subdivision of the state.” The Act further requires that all such health facilities implement these policies or equivalent policies, and encourages “all other organizations and entities that provide services related to physical or mental health and wellness,” including the University of California, to adopt the model policies.

To satisfy this mandate, on October 1, 2018, the California Attorney General’s Office published immigration enforcement-related guidance and model policies for health facilities, entitled “Promoting Safe and Secure Healthcare Access for All: Guidance and Model Policies to Assist California’s Healthcare Facilities in Responding to Immigration Issues.” The model policies address information sharing, responding to immigration enforcement presence at health facilities, providing information on patient rights (including immigrant patient rights) and remedies, monitoring and receiving visitors, and notifying minor patients’ parents of immigration law enforcement actions.

Given the California Values Act’s requirements that the model policies limit immigration enforcement assistance “to the fullest extent possible consistent with federal and state law” and all State- and local government-operated health facilities implement them, as well as UC Health’s commitment to creating the safest environment possible for all patients to obtain medical care regardless of their immigration status, UC Health has chosen to adopt the Attorney General’s model policies as set forth in this Policy while maintaining flexibility for UC health facilities to implement them consistent with local conditions.

In addition to the model policies, the Attorney General’s guidance “[p]rovides policy recommendations that comply with federal and state laws, and that may mitigate disruptions from immigration enforcement actions at healthcare facilities[.]” Health facilities may evaluate whether or not to adopt the Attorney General’s policy recommendations in their locally-established implementation policies and procedures. This Policy does not require adoption of these recommendations.

II. DEFINITIONS

The following definitions apply to this Policy:

**Health facility:** University of California Medical Centers and Hospitals, including University-owned Children’s Hospitals (e.g., UC Davis Medical Center and Children’s Hospital, UC Irvine Medical Center, Ronald Reagan UCLA Medical Center, Resnick Neuropsychiatric Hospital at UCLA, UCLA Mattel Children’s Hospital, UC San Diego Medical Center, UCSF Medical Center, UCSF Benioff Children’s Hospital San Francisco, UCSF Langley Porter Psychiatric Hospital and Clinics).
**Immigration enforcement:** Includes any and all efforts to investigate, enforce, or assist in the investigation or enforcement of any federal civil immigration law, and also includes any and all efforts to investigate, enforce, or assist in the investigation or enforcement of any federal criminal immigration law that penalizes a person’s presence in, entry, or reentry to, or employment in, the United States.

**Judicial warrant:** A warrant based on probable cause for a violation of federal criminal immigration law and issued by a federal judge or a federal magistrate judge that authorizes a law enforcement officer to arrest and take into custody the person who is the subject of the warrant.

**Patient:** An individual who receives health care services as a patient at a University health facility (as defined above).

### III. POLICY TEXT

#### A. Designated Health Facility Administrator

Health facilities shall designate an administrator and designees that are available during every shift to handle immigration issues, ensuring staff members and relevant volunteers are adequately dealing with immigration enforcement inquiries and requests involving patients, dissemination of information to patients, and compliance with internal procedures.

#### B. Responding to Information Requests from Immigration Enforcement Officers

1. Health facilities must implement policies that are protective of patient information, under which health facility staff members and volunteers disclose patient information only when required or expressly authorized to do so by all applicable laws.

2. Health facilities and their designated health facility administrators must consult legal counsel to help determine when and to what extent they are required to comply with administrative requests involving protected health information.

3. For responding to information requests issued by immigration enforcement officers, health facilities must develop a verification procedure to determine and document:
   a. The specific agency the requester is from;
   b. Whether the requester has law enforcement power;
   c. The specific types of protected health information the requester seeks; and
d. The reason the requester wants the information.

4. Health facilities must establish policies that provide guidance on determining whether a document labeled “subpoena,” “warrant,” or “summons” has been issued by a court or judicial officer. Often such requests are handled by the health facility’s privacy officer or medical records department, to assure that information is disclosed appropriately under all applicable laws. If possible, health facilities should consult with legal counsel each time on such matters.

5. If health facility is required under applicable laws to disclose patient information to immigration enforcement authorities without the patient’s authorization in compliance with a court order or judicial warrant, then the health facility must document the disclosure in compliance with facility policies and procedures. Such documentation must include information that supported the decision to disclose the information. Disclosures to law enforcement are subject to the accounting-of-disclosures requirement under the Health Insurance Portability and Accountability Act Privacy Rule.

C. Responding to Immigration Enforcement Officers’ Physical Presence at Health Facilities

Health facilities shall develop procedures for responding to an officer present at the health facility for immigration enforcement purposes, including the following:

1. As soon as possible, health facility personnel shall notify the designated health facility administrator and legal counsel of any request (including subpoenas, petitions, complaints, warrants, or court orders) by an immigration enforcement officer to access a health facility or a patient, or any request for the review of health facility documents.

2. Advise the officer that before proceeding with the officer’s request, health facility personnel must first notify and receive direction from the designated health facility administrator and legal counsel. Decline to answer questions posed by the officer. Advise the officer that the health facility is not obstructing the officer’s process and direct him or her to speak to the designated health facility administrator and/or legal counsel.

3. Ask to see, and make a copy of or note, the officer’s credentials (name and badge number or identification card). Also ask for and copy or note the telephone number of the officer’s supervisor.

4. Ask the officer to explain the purpose of the officer’s visit, and note the response.

5. Ask the officer to produce any documentation that authorizes health facility access.
6. Make copies of all documents provided by the officer.

7. State that the health facility does not consent to entry of the health facility or portions thereof.

8. Without expressing consent, respond according to the requirements of the officer’s documentation and consistent with all applicable laws. For example, unless otherwise provided by laws applying to patient information at the health facility, if the officer has:

   a. A U.S. Immigration and Customs Enforcement administrative “warrant”: Immediate compliance is not required. Inform the officer that the health facility cannot respond to the warrant until after it has been reviewed by a designated health facility administrator and legal counsel. Provide a copy of the warrant to the designated health facility administrator and legal counsel as soon as possible.

   b. A subpoena for production of documents or other evidence: Immediate compliance is not required. Inform the officer that the health facility cannot respond to the subpoena until after it has been reviewed by a designated health facility administrator and legal counsel. Give a copy of the subpoena to the designated health facility administrator and legal counsel as soon as possible.

   c. A federal judicial warrant (either a search-and-seizure warrant or an arrest warrant): Prompt compliance usually is required, but staff should consult with the designated health facility administrator and legal counsel before responding.

   d. A notice to appear: This document is not directed at the health facility. Health facility staff is under no obligation to deliver or facilitate service of this document to the person named in the document. If a copy of the document is received, give it to the designated health facility administrator and legal counsel as soon as possible.

   d-e. A request to notify officers upon release of a patient: When no document is provided to support a request, compliance is not required. Health facility staff should notify the health facility administrator and legal counsel.

A more detailed discussion of the different types of documents requesting information can be found in the California Attorney General’s model policies and guidance, “Promoting Safe and Secure Healthcare Access for All: Guidance and Model Policies to Assist California’s Healthcare Facilities in Responding to Immigration Issues” (pp. 18-20). Samples of administrative
warrants, judicial warrants, subpoenas, and a notice to appear form can be found in appendices to the Attorney General’s model policies and guidance.

9. Document the officer’s actions while in health facility premises in as much detail as possible, but without interfering with the officer’s movements.

10. If the officer orders staff to provide immediate access to facilities, health facility staff should comply with the officer’s order and also immediately contact a designated health facility administrator and legal counsel. Personnel also should not attempt to physically interfere with the officer, even if the officer appears to be acting without consent or appears to be exceeding the purported authority given by a warrant or other document. If an officer enters the premises without authority, health facility personnel shall simply document the officer’s actions while at the facility.

11. Health facility staff must complete an incident report that includes the information gathered as described above and the officer’s statements and actions.

D. Information on Patient Rights and Responsibilities

1. Health facilities should post and issue general information policies telling patients of their privacy rights and remedies.

a. Health facilities should give assurances that they will not release information to third parties for immigration enforcement purposes, except as required or expressly authorized by law or court order.

b. Health facilities should provide a comprehensive list of privacy protections, under both federal law and California law (including a patient’s right of action for disclosures in violation of the Confidentiality of Medical Information Act).

2. Health facilities should post information guides regarding immigrant patient rights, including the right to remain silent. While immigration enforcement at health facilities is limited by U.S. Immigration and Customs Enforcement and U.S. Customs and Border Protection “sensitive-locations” policies, immigration agents may enter a public area of a health facility without a warrant or the facility’s consent and may question any person present (with that person’s consent).

E. Monitoring and Receiving Visitors

1. Each health facility may shall identify the areas of the facility that are subject to restricted access and use using mapping, signage, and physical or technical safeguards, as applicable, to consistently apply restrictions.
2. No outsider—which would include immigration enforcement officers—should be permitted to access restricted areas shall enter or remain on a health facility’s grounds without having registered with the health facility. If there are no exigent circumstances necessitating immediate action (e.g., enforcement actions involving national security or terrorism matters or the immediate arrest or pursuit of a dangerous felon, terrorist suspect, or others who present an imminent danger to public safety), and if the visitor does not possess a judicial warrant or court order that provides a basis for the visit, the visitor must provide the following information to health facility’s designee:

   a. Name, address, occupation;
   b. Age, if less than 21 years;
   c. Purpose in entering the health facility; and
   d. Proof of identity.

   (Try to obtain this information even from a visitor or officer with a court order.)

3. Health facilities shall post signs at their entrances to notify outsiders of the hours of operation and requirements for registration.

4. Health facility personnel shall report entry by immigration enforcement officers to the designated health facility administrator.

F. Notification of Immigration Law Enforcement Actions Involving Minor Patients

1. Health facility personnel must receive consent from a minor patient’s parent or guardian (provided the child is not legally regarded as his or her own personal representative of his or her health information) before a minor patient can be interviewed or searched by any officer seeking to enforce the civil immigration laws at the health facility, unless the officer presents a valid, effective warrant signed by a judge, or presents a valid, effective court order.

2. Health facility personnel shall immediately notify the minor patient’s parent or guardian if a law enforcement officer requests or gains access to the patient for immigration enforcement purposes, unless such access was in compliance with a judicial warrant or subpoena that restricts the disclosure of the information to the parent or guardian.

IV. COMPLIANCE / RESPONSIBILITIES

Health facilities are responsible for designating administrators to handle immigration issues. Designated health facility administrators are responsible for ensuring
compliance with this Policy and locally established implementation policies and procedures.

V. PROCEDURES

Health facilities must adopt local policies and procedures addressing implementation of this Policy. All such policies and procedures must be consistent with this Policy and with local conditions and existing requirements applicable to the health facilities and health information. Health facilities should develop and post their local implementation policies and procedures and post this Policy, if at all possible in the languages commonly spoken in the local community, and make these policies accessible on their websites. Staff, including any relevant volunteers, should be well-trained in these policies and procedures.

VI. RELATED INFORMATION


VII. FREQUENTLY ASKED QUESTIONS

Are the AG’s related policy recommendations required? Not applicable. This policy complies with the AG’s model policies. UC Health facilities are encouraged to adopt the AG’s additional recommendations in their locally established policies and
procedures including limiting the collection of immigration status/citizen status/national origin information to the patient only.

REVISION HISTORY

October 14, 2019: Issuance Date

This new interim policy was remediated to meet the Web Content Accessibility Guidelines (WCAG) 2.0.

December 9, 2020: reviewed and approved extending interim status through May 2021

New policy issued: [Date]